BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	REAR PLATE FORPLA	ASMA DISPLAY	PANEL						
Fill in Appropriate	the specification of wh	ich is attached he	reto. If not attached here	o, the application is ide	entified by the attor	ney docket n	umber as set		
• • •	forth above and/or the following: The specification was filed on								
Information -	The specification								
For Use Without	United States Application Numberand amended on					(if applicable) and/or			
Specification Attached:	7 0000					as j C i			
Attacheu.	International Application Number PCT/KR2002/002305								
	amanded on					\\TF=/			
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.								
·	representative or assigns more than twelve months (six months for designs) prior to this application, and that the application application or inventor's certificate on this invention has been filled in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate is the application on which priority is claimed:								
	or inventor's certificat a filing date before the Prior Foreign Appli	at Of the applicate	on on which priority is cl	aimed:		Priority C	Claimed		
Insert Priority				December 6, 2002	.				
Information:	10-2002-0077251			(Month/Day/Year	Filed)	Yes	No		
(if appropriate)	(Number)	(Country)		(Worth) Day/ Teta	1 Lea,	_			
									
	(Number)	(Country)		(Month/Day/Year	Filed)	Yes	No		
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				(Month/Day/Year	Filed)	Yes	No		
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	(Number)	(Country)		(Month/Day/Year	Filed)	Yes	140		
٠	I hereby claim the be	nefit under Title 3	5, United States Code, §1	19(e) of any United Sta	tes provisional app	lications(s) li	sted below.		
Insert Provisional	(Filling Data)								
Application(s): (if any)	(Application Number)			(Filing Date)					
	(Application Number)			(Filing Date)					
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:								
	Country		Application Number	Date	of Filing (Month/I	Day/Year)			
Insert Requested Information: (if appropriate)					1/ DCT	lication(s)	including for		
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.								
Insert Prior U.S. Application(s): (if any)	(Application Numb	er)	(Filing Date)	(Sta	tus - patented, pend	ding, abando	ned)		
Page 1 of 2 (Rev. 05/2004)	(Application Number	er)	(Filing Date)	(Sta	tus - patented, pen	ding, abando	ned)		

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Facsimile: (703) 205-8050 Telephone: (703) 205-8000

PLEASE NOTE: YOU MUST COMPLETE THE **FOLLOWING:**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ull Name of First or Sole Inventor: sect Name of inventor ascet Date This Document is Signed	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	~!	DATE*					
nsert Date This Document is Signed	Won-Duk CHO	Wang typ	(no	May Inth 2005					
nsert Residence nsert Citizenship>	Residence (City, State & Country)	- -	CITIZENSHI	P /					
	Gyeongsang buk-do Korea		Korean						
nsert Post Officei Address →	MAILING ADDRESS (Complete Street Address including City, State & Country)								
	Head Office/Plant 2, 624 Gupo-dong, Gumi city, 730-400 Gyeongsang buk-do Korea								
ull Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE* .					
	Residence (City, State & Country)		CITIZENSHI	P					
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iuli Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
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ull Name of Fourth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
Inventor, if any: see above	01.22.1								
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	GIVEN NAME/FAMILY NAME	including City, State & Country) INVENTOR'S SIGNATURE		DATE*					
Full Name of Fifth Inventor, if any: see above				DATE*					
Inventor, if any:			CITIZENSHI						
Inventor, if any:	GIVEN NAME/FAMILY NAME		CITIZENSHI						
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Inventor, if any: see above Full Name of Sixth Inventor, if any:	GIVEN NAME/FAMILY NAME Residence (City, State & Country) MAILING ADDRESS (Complete Street Address	INVENTOR'S SIGNATURE s including City, State & Country)	CITIZENSHI	P DATE*					
Inventor, if any: see above Full Name of Sixth Inventor, if any:	GIVEN NAME/FAMILY NAME Residence (City, State & Country) MAILING ADDRESS (Complete Street Address GIVEN NAME/FAMILY NAME Residence (City, State & Country)	INVENTOR'S SIGNATURE s including City, State & Country) INVENTOR'S SIGNATURE		P DATE*					
Inventor, if any: see above Full Name of Sixth Inventor, if any:	GIVEN NAME/FAMILY NAME Residence (City, State & Country) MAILING ADDRESS (Complete Street Address GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE s including City, State & Country) INVENTOR'S SIGNATURE		P DATE*					